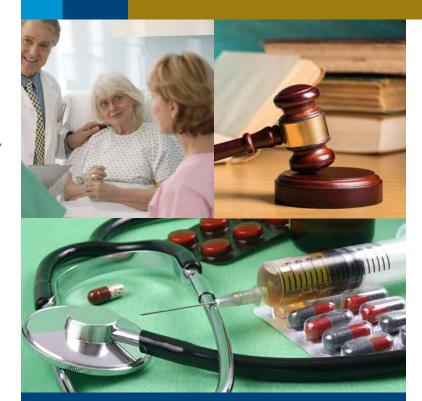
MEDICALD FRAUD CONTROL UNIT
VIRGINIA OFFICE OF THE ATTORNEY GENER
Office of the Attorney General
Medicaid Fraud Control Unit
202 North Ninth Street
Richmond, Virginia 23219
www.ag.virginia.gov



SAVE YOUR MEDICAID FUNDS REPORT MEDICAID FRAUD



MEDICAID FRAUD CONTROL UNIT

OFFICE OF THE ATTORNEY GENERAL OF VIRGINIA

PROTECTING VIRGINIA SENIORS AND ENSURING QUALITY CARE

Recognize the Problem

Fraudulent Providers

Although the vast majority of health care providers are honest and dedicated to providing high quality health care to their patients, Medicaid provider fraud costs American taxpayers hundreds of millions of dollars annually and threatens the integrity of the Medicaid program. The Virginia **Medicaid Fraud Control Unit protects** the Commonwealth by investigating and prosecuting Medicaid fraud from providers receiving payment from the Commonwealth's Medical Assistance Program (Medicaid). The Unit also investigates allegations of abuse or neglect of elderly and incapacitated adults receiving benefits through the Medicaid program.

You can help by recognizing provider fraud, such as:

- Phantom Billing: billing for services not rendered.
- Fraudulent Billing: billing for unnecessary services or tests.
- Embezzlement: stealing money entrusted to the providers by patients, such as their nursing home resident accounts.
- **Upcoding**: billing for more expensive services than what was provided.
- Kickbacks: one provider pays another in exchange for referrals or other business.
- **Duplicate Billing:** billing for the same services more than once; or billing more than one payment source (i.e., Medicaid and a private insurer).









Abuse or Neglect of Elderly or Incapacitated Patients by Health Care Workers

The Medicaid Fraud Control Unit also investigates and prosecutes cases of patient abuse and neglect in nursing homes.

You can help by recognizing signs of patient abuse or neglect, such as:

- Unexplained bruising
- Fractures
- Pressure ulcers
- Malnutrition
- Dehydration



Understand the Impact

For patients

Reporting providers who are committing fraud takes the criminals out of the provider pool and gives you access to law-abiding providers.

For providers

Provider fraud is willful and intentional deceit or misrepresentation by a provider in order to obtain payment. Safeguard the reputation of your industry by reporting providers who take advantage of the system.





For families

Your family member is entitled to quality care. You should be able to trust providers without worrying about the possibility of abuse or neglect of those you love. Without attentive medical care, patients can become incapacitated, and that could leave you with the difficult task of finding alternative solutions for their care.

For citizens

Medicaid programs are funded by public resources, meaning your hard-earned tax dollars. By reporting fraud and

stopping people from stealing from the program, citizens can help stop the bleeding of the Medicaid program caused by unscrupulous providers.



Trust the Medicaid Fraud Control Unit

Medicaid Fraud Control Unit staff members include experienced criminal investigators, auditors, analysts, nurses and attorneys experienced in criminal and civil prosecutions of fraud and abuse cases.



Attorney General Mark R. Herring

Report Providers

The Medicaid Fraud Control Unit's primary goal is to provide the best practicable service to Virginia citizens receiving Medicaid benefits, and to prevent abuse of taxpayer resources through the diligent and aggressive investigation of criminal activity. If you suspect fraud, patient abuse, or neglect, report the incident to the Medicaid Fraud Control Unit. A trained investigator will review the information and determine whether to follow up or refer the incident to a more appropriate government agency.

By telephone

Toll-free: 1-800-371-0824

Local: (804) 371-0779 or (804) 786-2071

By mail

Office of the Attorney General Attention: Medicaid Fraud Control Unit 202 North Ninth Street Richmond, Virginia 23219

By email

MFCU_mail@oag.state.va.us

Online

http://www.ag.virginia.gov/ Click on "Programs and Initiatives", then click on "Medicaid Fraud", and select "How to Report Fraud, Abuse and Neglect"

Facebook

www.Facebook.com/VAMFCU

Twitter

www.twitter.com/VaMFCU

Report Recipients to the Department of Medical Assistance Services

Fraudulent Recipients

Although the Medicaid Fraud Control Unit does not investigate recipients who misuse Medicaid funds, the Department of Medical Assistance Services does. When an investigation confirms that someone received Medicaid services illegally, the case is prosecuted by the local Commonwealth's Attorney or in Federal court (for joint investigations).

Occasionally, the agency makes honest mistakes, or eligibility errors occur due to a misunderstanding. These situations do not constitute fraud. However, some people do receive Medicaid funds they are not entitled to, and this depletes the funds available to help honest, deserving recipients.

You can help by recognizing recipient dishonesty, such as:

- Not reporting income or disclosing resources
- · Not reporting changes in household member composition
- Transferring assets without compensation
- · Sharing Medicaid cards
- · Prescription fraud and drug diversion

If you suspect someone is receiving Medicaid funding illegally, report the incident to the Department of Medical Assistance Services. A trained investigator will review the information and determine whether to follow up or refer the incident to a more appropriate government agency.

By telephone

1-866-486-1971 or (804) 786-1066

By mail

Department of Medical Assistance Services Recipient Audit Unit 600 East Broad Street, Suite 1300 Richmond, Virginia 23219

By e-mail

RecipientFraud@DMAS.virginia.gov